 **Faculty of Science & Engineering**

**REQUEST FOR PERMISSION TO SUBMIT EARLY**

***PLEASE READ THE GUIDANCE ON THE*** [***FSE DOCTORAL ACADEMY WEBSITE***](https://www.se.manchester.ac.uk/doctoral-academy/research/change-of-circumstances/extensions/) ***BEFORE COMPLETING THIS REQUEST***

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| **Part 1: Student details**  **Student ID number** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ **Title** \_\_\_\_\_\_\_\_\_\_  **Surname \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Forename(s) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**  **Department \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**  **Main supervisor \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**  **Centre for Doctoral Training (if applicable) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**    **Current Degree Registration: PhD/EngD/EntD/MPhil**  **Part-time/Full-time**  **Source of funding or sponsor (if applicable) (e.g. UKRI, President’s Doctoral Scholarship, Government) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_** |
| **Part 2: Request details**  **The current end date of my programme is DD/MM/YYYY**  **The requested submission date for my thesis is DD/MM/YYYY**  ----------------------------------------------------------------------------------------------------------------------  The University of Manchester will use the information which you supply to us to consider a request for special permission in relation to the regulations (for an extension of study).  If necessary, we may also disclose your information to UK Research & Innovation (UKRI), if you are a funded student.  We will keep your information for a period of 6 years following completion of programme, or withdrawal from programme, after which your personal data will be securely destroyed.  For further information on how your data are used, how we maintain the security of your information and your rights to access information we hold on you please contact the University’s Records Management Office.  **I give consent for the data provided on this form, and any accompanying documentation, to be processed by the Faculty for the purposes of this request**  **I confirm that I have read the guidelines for this request form and consulted the University’s *Ordinances & Regulations* for my degree programme**  **I understand that I will still be required to pay full fees for the degree period for which I originally registered.**  **Signed Student \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ DD/MM/YYYY** |
| **Part 4: Recommendation of the supervisor**  **I STRONGLY SUPPORT THIS REQUEST AND RECOMMEND ACCEPTANCE OF THE THESIS SUBMISSION ON THE DATE STATED ABOVE**  **Signed Supervisor \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ DD/MM/YYYY** |

**Once completed, please return this form and any supporting documentation to:**

**FSE Doctoral Academy Support Team (Examinations)**

[**FSE.doctoralacademy.exams@manchester.ac.uk**](mailto:FSE.doctoralacademy.exams@manchester.ac.uk)